

DIVORCE WITHOUT CHILDREN

STARTING A CASE

YOU CAN USE THIS PACKET IF ALL THIS IS TRUE:

- You want a legal divorce.
- You do not have a covenant marriage.
- You and/or your spouse will have lived in Arizona, or you will have been a member of the armed forces stationed in Arizona, for at least the 90 days before the date you file your court papers.
- You and your spouse do not have children under age 18, and the wife is not pregnant by the husband.
- Your spouse is not on active duty with the military.

Arizona Rules of Family Law Procedure: The Arizona Rules of Family Law Procedure describe the procedures and forms required in family law cases. You can read the Rules at the Law Library or online at <<http://government.westlaw.com/linkedslice/default.asp?SP=AZR-1000>>.

WARNING: Depending on the circumstances of your case, the Arizona Rules of Family Law Procedure may require you to complete procedures and forms not covered in this packet. You are required to read and follow all of the rules. If you do not, the court may impose sanctions on you. At a minimum, you must read and understand Section II, on Pleadings and Motions, Section VII, on Discovery and Disclosure, and Rule 92, on Civil Contempt and Sanctions for Non-Compliance with a Court Order.

Before signing a court document or getting involved with a court case, it's important to see an attorney to make sure you understand your legal rights and responsibilities. The Self-Help Center has information on finding an attorney.

INSTRUCTIONS

Protecting Your Address: If the other party has committed or threatened to commit physical violence against you or your children, and you do not want the other party to know your address: 1) use a post office box on all your court forms or 2) see Rule 7, Arizona Rules of Family Law Procedure, about how to protect your address. See the Self-Help Center packet *Order of Protection* if you need a court to order the other party to stay away from you.

STEP 1: READ THE FAMILY COURT SERVICES INFORMATION SHEET

STEP 2: READ THIS INFORMATION ABOUT GROUP HEALTH BENEFITS

Continuing group health benefits: In many cases, federal law lets an employee's spouse and children temporarily continue group health benefits under the employer's plan after the employee and spouse are legally separated or divorced. To qualify for this extension, you or your spouse must notify the employer of your separation or divorce within 60 days of the court's signing the Decree that ends your case. The beneficiary must pay the entire premium of the continued coverage; the employer makes no contribution.

STEP 3: READ THE NOTICE OF RIGHT TO CONVERT HEALTH INSURANCE

STEP 4: READ THE NOTICE REGARDING COMMUNITY DEBTS

STEP 5: DECIDE HOW TO DIVIDE PROPERTY AND DEBTS

You will enter this information on the Petition later in these instructions.

Community Property: Community property is property (other than a gift or inheritance) that you and your spouse acquire after you were married and before one spouse serves divorce papers on the other. See the Petition for a list of types of community property. One type of community property is retirement benefits (pension/retirement fund/profit sharing/stock plans/401k). Division of retirement benefits is a complicated area of the law. You may want to see an attorney or accountant before deciding how to divide retirement benefits. After the judge divides the retirement benefits, you will have to contact an attorney, accountant, or company representative to get the documents needed to access the retirement monies.

Community Debts: Community debts are debts you and your spouse acquire after you were married and before one spouse serves divorce papers on the other, no matter who spent the money. Generally, the court will order a fair division and will not give most or all of the property or debts to one spouse. If you and/or your spouse still owe money on a piece of property, the court will probably give that debt to the same spouse who gets that property. You may ask that real property be sold and the proceeds divided between you and your spouse. Community property and debts you fail to list on the Petition will be considered still owned or owed by both you and your spouse. If you have questions, or have a lot of community property or debts, you should speak with an attorney.

Separate Property: Separate property is property you or your spouse acquire before you were married, after one spouse serves divorce papers on the other, or as an inheritance or gift.

Separate Debts: In general, separate debts are debts you or your spouse acquire before you were married or after one spouse serves divorce papers on the other.

Generally, the court will confirm that your separate property and debts are yours and your spouse's separate property and debts are your spouse's.

STEP 6: FILL OUT THE DOMESTIC RELATIONS COVER SHEET

You are the Petitioner. Your spouse is the Respondent. Fill in as much information as you know.

STEP 7: FILL OUT THE FOLLOWING FORMS

- ☐ Confidential Sensitive Data Form
- ☐ Petition For Divorce Without Children
- ☐ Summons
- ☐ Preliminary Injunction

STEP 8: SCHEDULE A PRE-FILING MEETING

YOU MUST READ AND FOLLOW ALL OF THE INSTRUCTIONS BEFORE THIS STEP BEFORE YOU SCHEDULE YOUR PRE-FILING MEETING.

At this free court service, an attorney will meet with you one-on-one to do the following:

- Make sure you have everything you need to start your case
- Explain what steps you need to take after you start your case
- Help you prepare child support forms, if you have children

Call 928-679-7544 to schedule your Pre-Filing Meeting.

STEP 9: GO TO THE PRE-FILING MEETING

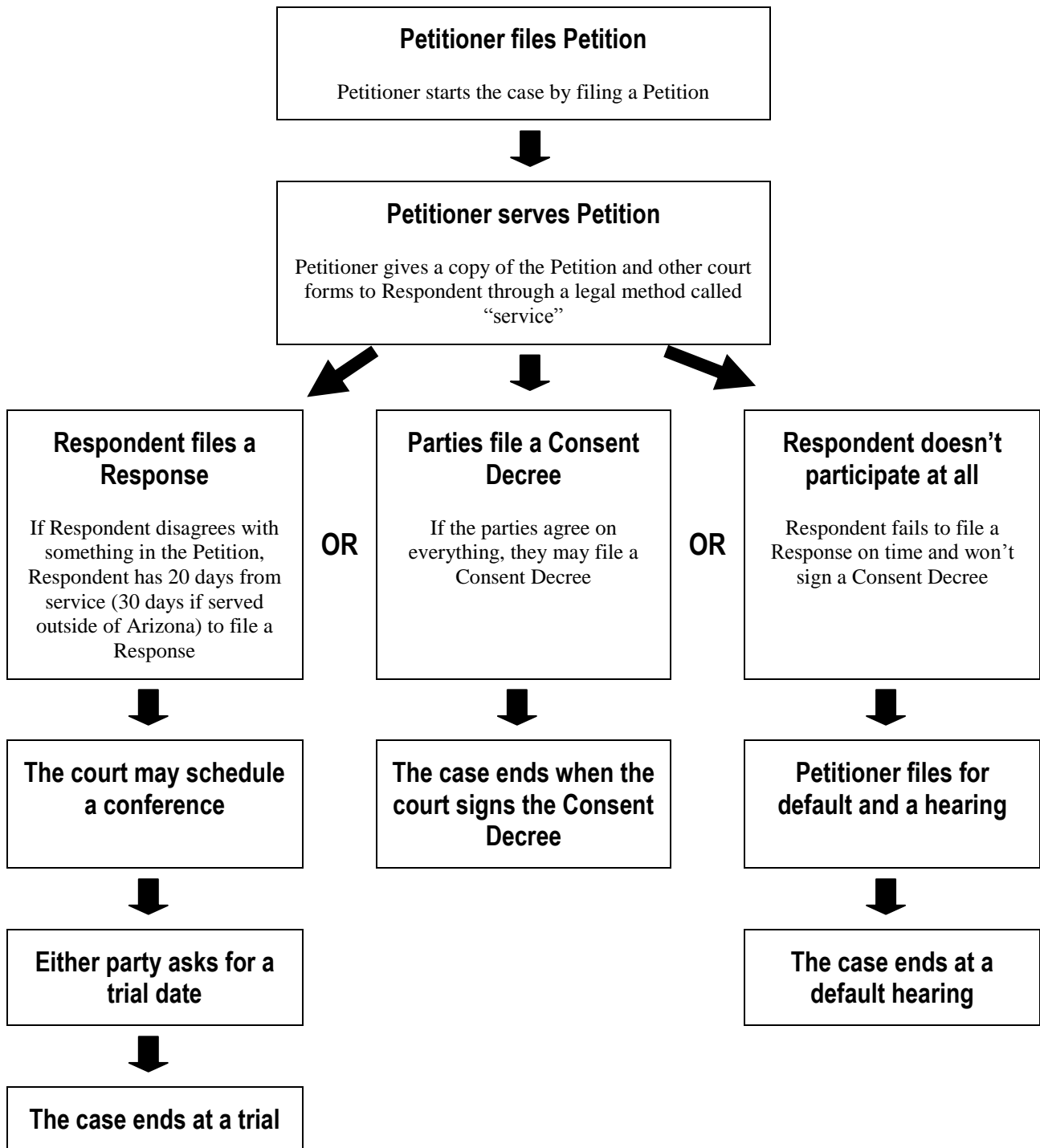
Bring the following, completed according to the instructions:

- ☐ Domestic Relations Cover Sheet
- ☐ Confidential Sensitive Data Form
- ☐ Petition for Divorce without Children
- ☐ Summons
- ☐ Preliminary Injunction
- ☐ Notice of Right to Convert Health Insurance
- ☐ Notice Regarding Community Debts (blank)

If you want to start your case immediately after your Pre-Filing Meeting, also bring the following:

- [] Money to make copies
- [] The filing fee of \$273 (The Clerk's Office accepts cash, money orders, and cashier's checks payable to "Clerk of Superior Court". If you can't afford the fee, see the Self-Help Center packet *Getting Help With a Filing Fee.*)

Flowchart of the Court Process



How Long Does It Take? Divorce or Legal Separation: at least 60 days. Unmarried parents: at least 30 days.

Where Can I Find Forms? The Law Library has forms for all of these steps.
928-679-7540, 877-806-3187, www.coconino.az.gov/lawlibrary

FAMILY COURT SERVICES

Service	When Can I Ask for It?	How Do I Ask for It?	How Much Does it Cost?
Reconciliation/Separation Counseling	Before or during a divorce or legal separation	See the self-help packet <i>Asking for Conciliation Court Services</i>	<ul style="list-style-type: none"> • 1st session free • 2 more sessions at \$16 per session
Family Mediation The parents meet with a neutral mediator to come to agreements about legal decision-making and parenting time.	Before, during, or after a court case involving children	See the self-help packet <i>Asking for Conciliation Court Services</i>	Free
Family Evaluation A mental health professional evaluates the family and recommends a legal decision-making and parenting time arrangement to the court.	During a court case involving children	See the self-help packet <i>Asking for Conciliation Court Services</i>	Free
	After a court case involving children		Fee set by the evaluator
Property Mediation The parties meet with a neutral mediator to come to agreements about the division of property and debt.	Before a divorce or legal separation	Call the Alternative Dispute Resolution Coordinator at 928-679-7508.	\$240 per party
	During or after a divorce or legal separation	See the self-help packet <i>Asking for Property Mediation</i>	

Questions? Call the Law Library at 679-7540 or 877-806-3187.

Case Number: _____

NOTICE OF RIGHT TO CONVERT HEALTH INSURANCE (ARS 20-1377 and 20-1408)

Important information if you are on your spouse's insurance plan: When a Petition for Dissolution of Marriage (papers for a divorce decree) is filed, you or your children may continue to be covered under your spouse's health insurance policy, but you must take some steps to protect your rights.

What insurance coverage applies to you and how to get it: If you're covered by your spouse's health insurance and want coverage to continue after the divorce, you must contact the insurance company as soon as possible and start paying the monthly insurance premium within 31 days of the date the insurance would otherwise stop. The insurer can choose whether to continue coverage under the current policy or change it to your name. If the policy is changed to your name, it's called a "converted" policy. If the insurer converts the policy, the insurer must give you the same or the most similar level of coverage available, unless you ask for a lower level.

What coverage applies to your children: If you choose to continue coverage as a dependent spouse, you can also choose to continue coverage for your dependent children if you are responsible for their care or support.

Pre-existing conditions or exclusions from insurance coverage: Whether the insurance is continued or converted, the insurance must be provided to you without proof of insurability and without exclusions for coverage other than what was previously excluded before the insurance was continued or converted.

Limits on rights to insurance coverage for you and your children: You might not be entitled to continued or converted coverage if you're eligible for Medicare or coverage by similar insurance that, together with the continued coverage, would over-insure you. However, dependent children of a person eligible for Medicare may be covered by a continuance or conversion. If you have questions about coverage, check with the insurer and/or the spouse's employer.

Case Number: _____

NOTICE REGARDING COMMUNITY DEBTS (ARS 25-318)

In your property settlement agreement or decree of dissolution or legal separation, the court may assign responsibility for certain community debts to one spouse or the other. Please be aware that a court order that does this is binding on the spouses only and does not necessarily relieve either of you from your responsibility for these community debts. These debts are matters of contract between both of you and your creditors (such as banks, credit unions, credit card issuers, finance companies, utility companies, medical providers and retailers).

Since your creditors are not parties to this court case, they are not bound by court orders or any agreements you and your spouse reach in this case. On request, the court may impose a lien against the separate property of a spouse to secure payment of debts that the court orders that spouse to pay.

You may want to contact your creditors to discuss your debts as well as the possible effects of your court case on your debts. To assist you in identifying your creditors, you may obtain a copy of your spouse's credit report by making a written request to the court for an order requiring a credit reporting agency to release the report to you. Within thirty days after receipt of a request from a spouse who is a party to a dissolution of marriage or legal separation action, which includes the court and case number of the action, creditors are required by law to provide information as to the balance and account status of any debts for which the requesting spouse may be liable to the creditor. You may wish to use the following form, or one that is similar, to contact your creditors:

CREDITOR NOTIFICATION

Date: _____

Creditor's Name: _____

Street Address: _____

City, State, Zip: _____

To whom it may concern:

I am a party to Case Number DO _____ in the Coconino
County Superior Court.

Within thirty days after receipt of this notice, you are requested to provide the balance and
account status of any debt identified by account number for which the requesting party may be
liable to you.

Your Name: _____

Street Address: _____

City, State, Zip: _____

Sincerely,

Your Signature

SUPERIOR COURT OF COCONINO COUNTY, ARIZONA

DOMESTIC RELATIONS COVER SHEET - CASE NUMBER DO _____

Please print or type the following information

TYPE OF ACTION: (Check One)

☐ Dissolution: ☐ With Children / ☐ Without Children
☐ Separation: ☐ With Children / ☐ Without Children
☐ Move a Case to This Court From Another State

☐ Annulment ☐ Custody (Unmarried Parents)
☐ Paternity/Maternity ☐ Order of Protection

PETITIONER

Name _____
Mailing Address _____
City, State, Zip _____
Phone Number _____
Email _____
Gross Monthly Income: _____
Date of Birth _____ ☐ Male ☐ Female
☐ White ☐ Hispanic ☐ Black ☐ Native American
☐ Native Hawaiian/Pacific Islander ☐ Asian ☐ Other

RESPONDENT

Name _____
Mailing Address _____
City, State, Zip _____
Phone Number _____
Email _____
Gross Monthly Income: _____
Date of Birth _____ ☐ Male ☐ Female
☐ White ☐ Hispanic ☐ Black ☐ Native American
☐ Native Hawaiian/Pacific Islander ☐ Asian ☐ Other

PETITIONER'S ATTORNEY

Name _____
Mailing Address _____
City, State, Zip _____
Phone Number _____

RESPONDENT'S ATTORNEY

Name _____
Mailing Address _____
City, State, Zip _____
Phone Number _____

MINOR CHILDREN

Name _____
Name _____
Name _____
Name _____

DOB _____
DOB _____
DOB _____
DOB _____

Names and DOB of any OTHER minor children of the petitioner and/or respondent, who are not involved in this case.

Are any of the children named above parties in a ☐ Juvenile Delinquency, ☐ Dependency or ☐ Guardianship?

Have there been any other cases (excluding minor traffic offenses) in any court involving members of this family? If so, provide the case number. Please ask the Clerk to look up the case number for you if you do not know it.

Has anyone listed on this cover sheet been named in a Order of Protection or Injunction Against Harassment? If yes, please identify.

What Court granted the Protection Order?

Where did you get the forms you are filing today? ☐ Self -Help Center ☐ Online ☐ Attorney ☐ Bookstore
☐ Other: _____

FLAP Attorney Initials _____

Name of Person Filing: _____
Mailing Address: _____
City, State, Zip: _____
Phone Number: _____
Representing Self _____

SUPERIOR COURT OF ARIZONA, COUNTY OF COCONINO

_____ Case Number (*leave blank*): DO _____
Petitioner's Name

CONFIDENTIAL SENSITIVE DATA
FORM

_____ Respondent's Name
NOT FOR PUBLIC RECORD
(OMIT SOCIAL SECURITY DATA ON OTHER FORMS)

A. Personal Information:

	Name	Date of Birth	Social Security Number
Petitioner:	_____	_____	_____
Respondent:	_____	_____	_____
Child:	_____	_____	_____
Child:	_____	_____	_____
Child:	_____	_____	_____
Child:	_____	_____	_____

OPTIONAL

B. Financial Account Numbers (including credit cards, financial institution records, investments, debts):

Financial Institution	Type of Account	Name(s) on Account	Account #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

C. Pension and Retirement Accounts (including IRAs, 401Ks):

Financial Institution	Type of Account	Name(s) on Account	Account #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

D. Life Insurance Policies:

Financial Institution	Type of Account	Name(s) on Account	Account #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Person Filing: _____
Mailing Address: _____
City, State, Zip: _____
Phone Number: _____
Representing Self _____

SUPERIOR COURT OF ARIZONA, COUNTY OF COCONINO

In re the marriage of _____ Case Number (*leave blank*): DO _____

Petitioner (Me)

**PETITION FOR DIVORCE WITHOUT
CHILDREN**

Respondent (My spouse)

I STATE THE FOLLOWING UNDER OATH:

My Name: _____

Mailing Address: _____ City, State, Zip: _____

Birthdate: _____ Phone Number: _____ Job title: _____

Number of months/years in a row to date I have lived in Arizona: _____

If not living in Arizona now, I ☐ lived ☐ did not live in Arizona at some point during our marriage.

My Spouse's Name: _____

Mailing Address: _____ City, State, Zip: _____

Birthdate: _____ Phone Number: _____ Job title: _____

Number of months/years in a row to date my spouse has lived in Arizona: _____

If not living in Arizona now, my spouse ☐ lived ☐ did not live in Arizona at some point during our marriage.

The Marriage: Date of Marriage: _____

City and state or country where we were married: _____

Our marriage is irretrievably broken. The conciliation provisions have been met or do not apply. We do not have a covenant marriage.

Military Service: My spouse is not in military service.

Residency: I and/or my spouse will have lived in Arizona, or I will have been stationed in Arizona while a member of the Armed Forces, for at least the 90 days before the date I file this Petition.

Minor Children: We have no biological or adopted children together, and the wife is not pregnant by the husband.

I ASK THE COURT TO ORDER THE FOLLOWING:

Divorce: Order that my spouse and I are divorced.

Spousal Support:

- ☐ Neither party is entitled to spousal support.
- ☐ Award ☐ me OR ☐ my spouse \$_____ per month in spousal support from the other party beginning the first day of the month after the Decree is signed because he/she:
- ☐ Lacks sufficient property to provide for his or her reasonable needs
- ☐ Is unable to support himself or herself through appropriate employment
- ☐ Is the custodian of at least one child whose age or condition is such that the person should not be required to seek employment outside the home
- ☐ Lacks earning ability in the labor market adequate to support himself or herself
- ☐ Contributed to the educational opportunities of the other spouse
- ☐ Had a marriage of long duration and is now of an age that precludes the possibility of gaining employment adequate to support himself or herself

Order that payments be made by the first day of each month thereafter and continue until the receiving party is remarried or deceased or until _____. Order that payments be made through the Support Payment Clearinghouse by automatic wage assignment. If there are temporary spousal maintenance orders, order a judgment for arrearages when the judge signs the Decree.

Property and Debts:

WARNING: If you own any property or owe any debts, or if your spouse does, you must list them. See the Instructions in this packet for details.

Order our community property and debts divided and our separate property and debts confirmed as follows.

Community Property:

	Value	Me	My spouse
Real Estate:			
Address: _____	\$_____	<input type="checkbox"/>	<input type="checkbox"/>
Legal Description: _____			
Address: _____	\$_____	<input type="checkbox"/>	<input type="checkbox"/>
Legal Description: _____			
Bank Accounts:			
Enter the name on the account and the account description (for example, "savings").			
_____	\$_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$_____	<input type="checkbox"/>	<input type="checkbox"/>

_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Motor Vehicles:			
Make: _____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Model: _____			
Lienholder: _____			
Last Four Digits of VIN: _____			
Make: _____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Model: _____			
Lienholder: _____			
Last Four Digits of VIN: _____			
Employment Benefits:			
<i>Examples: 401K, retirement accounts, pensions.</i>			
<i>Enter name on the account and the fund name.</i>			
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>

Other Community Property:

☐ My spouse and I have already divided all remaining property, and I ask the court to confirm that division, except as follows.

	Value	Me	My spouse
Household Furniture and Appliances:			
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Other:			
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>

Community Debts:

Enter the name on the account, creditor, and description (for example, "credit card").

_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>

Petitioner's Name: _____
Mailing Address: _____
City, State, Zip: _____
Phone Number: _____
Representing Self _____

SUPERIOR COURT OF ARIZONA, COUNTY OF COCONINO

Petitioner's Name: _____ Case Number: DO _____

SUMMONS

Respondent's Name: _____

THE STATE OF ARIZONA TO (*enter Respondent's name*): _____

YOU ARE SUMMONED and required to appear and defend within the time applicable in this action in this court. If served in Arizona, you shall appear and defend within 20 days of service on you of the Summons and Petition, excluding the day of service. If served outside of Arizona, you shall appear and defend within 30 days of service on you of the Summons and Petition, excluding the day of service. Direct service is complete when made. Service by publication is complete 30 days after the first publication.

If you fail to appear and defend within the time applicable, judgment by default may be rendered against you for the relief demanded in the Petition.

In order to appear and defend, you must file a Response in writing with the clerk of this court, accompanied by the necessary filing fee, within the time required, and you must serve a copy of any Response on the Petitioner.

A copy of the pleading being served may be obtained from the Clerk of Superior Court, Coconino County Courthouse, 200 N. San Francisco St., Flagstaff, AZ 86001.

Requests for reasonable accommodation for persons with disabilities must be made to the court by parties at least three (3) working days in advance of a scheduled court proceeding.

If this is an annulment, divorce, or legal separation, either party can ask the court for counseling or mediation to try to reconcile or to come to agreements about the case outside of court. You can find a form at the Law Library.

Leave this blank. This is for the court to fill in.

SIGNED AND SEALED this date: _____

Clerk of Superior Court

By Deputy Clerk: _____

Person Filing: _____
Mailing Address: _____
City, State, Zip: _____
Phone Number: _____
Representing Self _____

SUPERIOR COURT OF ARIZONA, COUNTY OF COCONINO

Petitioner's Name: _____ Case Number: DO _____

PRELIMINARY INJUNCTION

Respondent's Name: _____

WARNING: This is an official order from the court. It affects your rights. Read it immediately and carefully. If you do not understand it, contact a lawyer for help.

Your spouse has filed a Petition for Dissolution (Divorce) or Petition for Annulment or Petition for Legal Separation with the Court. This order is made at the direction of the presiding judge of the Superior Court of Arizona in Coconino County. It has the same force and effect as an order signed by the judge. You and your spouse must obey this order. It may be enforced by any remedy available under the law, including an order of contempt of court. To help you understand this order, we have explained it. Read the explanation and the statute itself. If you have any questions, you should contact a lawyer for help.

EXPLANATION: (What does this order mean to you?)

- 1. ACTIONS FORBIDDEN BY THIS ORDER:** From the time the Petition for Dissolution (Divorce), Annulment, or Legal Separation is filed with the Court, and until the judge signs the Decree, or until further court order, you and your spouse shall not do any of the following things:
- a. Hide earnings or community property from your spouse, AND
 - b. Take out a loan on the community property, AND
 - c. Sell the community property or give it away to someone, UNLESS you have your spouse's or the court's written permission. The law allows for situations in which you may need to transfer joint or community property as part of the every day running of a business; or in which the sale of community property is necessary to meet the necessities of life, such as food, shelter, or clothing; or to pay court fees and attorney fees associated with this action. If this applies to you, you should see a lawyer for help, AND
 - d. Harass or bother your spouse or the children, AND
 - e. Physically abuse or threaten your spouse or the children, AND
 - f. Take children common to your marriage out of Arizona for any reason unless you and your spouse have a written agreement or court order beforehand.

- g. Remove or cause to be removed your spouse or the parties' children from any existing insurance coverage, including medical, hospital, dental, automobile, and disability insurance. Parties shall maintain all insurance coverage in full force and effect.

STATUTORY REQUIREMENTS: Arizona Law, A.R.S. 25-315(A) provides:

- 1(a). RESTRICTIONS ON PROPERTY OF THE MARRIAGE:** Neither party shall transfer, encumber, use as collateral on a loan, conceal, sell, or otherwise dispose of any of the parties' joint, common, or community property, unless related to the usual course of business, the necessities of life, or court fees and reasonable attorney fees associated with an action filed under this article, without the parties' written consent or the court's permission.
- 1(b). REQUIREMENTS OF BEHAVIOR:** Neither party shall molest, harass, disturb the peace of, or commit assault or battery on the other party's person or the parties' natural or adopted children.
- 1(c). RESTRICTIONS ABOUT YOUR CHILDREN:** Neither party shall remove any natural or adopted child of the parties then residing in Arizona from the court's jurisdiction without advance written consent of the parties or the court's permission.
- 1(d). RESTRICTIONS ABOUT INSURANCE:** Neither party shall remove or cause to be removed the other party or the parties' children from any existing insurance coverage, including medical, hospital, dental, automobile, and disability insurance. Both parties shall maintain all insurance coverage in full force and effect.
- 2. EFFECTIVE DATE OF THIS ORDER:** This order is effective against the Petitioner when the Petition was filed with the court. It is effective against the other party when it is served on the other party. It shall remain in effect until further court order or the entry of a Decree of Dissolution, Annulment, or Legal Separation.
- 3. ORDER TO PETITIONER:** You must serve a copy of this order on Respondent with a copy of the Petition, the Summons, and other required court papers.
- 4. WARNING:** This is an official court order. If you disobey it, the court may find you in contempt of court. You may also be arrested and prosecuted for the crime of interfering with judicial proceedings and any other crime you may have committed in disobeying this order.
- 5. LAW ENFORCEMENT:** You or your spouse may file a certified copy of this order with your local law enforcement agency. You may obtain a certified copy from the Clerk of Court. If any changes are made to this order and you have filed a certified copy with your local law enforcement agency, you must notify them of the changes.
- 6. DESCRIPTION OF THE PARTIES:**

Petitioner:

Name: _____
Last Four Digits of Driver's License #: _____
Date of Birth: _____

Gender: ☐ Male ☐ Female
Weight: _____
Height: _____

Respondent:

Name: _____
Last Four Digits of Driver's License #: _____
Date of Birth: _____

Gender: ☐ Male ☐ Female
Weight: _____
Height: _____

Leave this blank. This is for the court to fill in.

GIVEN UNDER MY HAND AND THE SEAL OF THE COURT this date: _____

Clerk of Superior Court

By Deputy Clerk: _____